								A plication or Docket Numb r					
	PATENT A	APPLICATIO Effectiv	N FEE DE e Decemb	RD		9	(0	295	89				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							LL E		OR	OTHER SMALL			
FOR NUMBER FILED				NUMBER	NUMBER EXTRA			FEE	1 Inchies	RATE	FEE		
ВА	SIC FEE							345.00	OR		690.00		
то	TAL CLAIMS	76	/6 minus 20= *			X\$ 9=			OR	X\$18=			
IND	EPENDENT CL	AIMS 4	minus 3 = * /			X39=			OR	X78=	18		
MULTIPLE DEPENDENT CLAIM PRESENT						+130)		交集	+260=			
* If	th difference	TOT		1	OR	TOTAL	NC						
CLAIMS AS AMENDED - PART II										MOTHER	THAN		
	(Column 1) (Column 2) (Column 3)						LL E	NTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE	1	RATE	ADDI- TIONAL FEE		
	Total	· / i	Minus	**	= ** *	X\$ 9)= =	Table Kin	• OR	X\$18=			
	Independent	•	Minus	***	=	X39	:	* * ***	OR	X78=			
Ų	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1		***	+260=			
i,		•				+130	TAL-	A STATE OF THE STATE OF	OR.	TOTAL	gitter. Birliggi salanda ya		
-	0	2		· ·	4_	ADDIT.			OR	ADDIT. FEE	940 T. U.		
AMENDMENT B	seasor and	(Column 1) CLAIMS	LAIMS MAINING AFTER	HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3)	7 33	Ť	ADDI-		S to the AR	ADDI:		
		REMAINING AFTER			PRESENT EXTRA	RAT	E.	TIONAL		RATE	TIONAL		
	Total	AMENDMENT	Minus					FEE.			FEE.		
	Independent	•	Minus	***	-	X\$ 9		15.6	OR	X\$18=			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						=		OR	_X78= ⟩			
	1					+130)=		OR	+260=			
						TO ADDIT.	TAL		ÖR	TOTAL ADDIT. FEE			
	A STATE OF	(Column 1)		(Column 2)	(Column 3)	المسايد	ا ا		1. 8				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ε.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL - FEE		
	Total	•	Minus	**	=	X\$ 9)= ·		OR,	X\$18=			
	Independent	•	Minus	***	=	X39	_/	· · · · · · · · · · · · · · · · · · ·	OR	/ X78=	※14、16年		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								1				
	If the entry in colum	olumn 3.	+130)= TAL		OR	+260=						
**	If the entry in column 1 is less than the intry in column 2, write "0" in column 3. If the "Highest Number Priviously Paid Fir" IN THIS SPACE is less than 20, inter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."							•	OR	ADDIT. FEE			
		***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, Inter 20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

FORM PTO-875 (Rev. 12/99)